

# EXHIBIT NM-D

## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS

|   |
|---|
| <b>A. NAME &amp; PHONE OF CONTACT AT FILER (optional)</b><br>CSC 800-858-5294   |
| <b>B. E-MAIL CONTACT AT FILER (optional)</b><br>FILINGDEPT@CSCINFO.COM  |
| <b>C. SEND ACKNOWLEDGMENT TO: (Name and Address)</b><br>801 ADLAI STEVENSON DR [179865469]<br>SPRINGFIELD, IL 62703<br>US |

Delaware Department of State  
U.C.C. Filing Section  
Filed: 06:35 PM 03/27/2020  
U.C.C. Initial Filing No: 2020 2258236

Service Request No: 20202434144

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

**1. DEBTOR'S NAME:** Provide only one Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name), if any part of the individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here ☐ and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

|   |                         |                     |                               |         |
|---|-------------------------|---------------------|-------------------------------|---------|
| 1a ORGANIZATION'S NAME<br>CORE SCIENTIFIC, INC. |                         |                     |                               |         |
| OR  | 1b INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX  |
| 1c MAILING ADDRESS                              | CITY                    | STATE               | POSTAL CODE                   | COUNTRY |
| 2800 NORTHUP WAY, STE. 220                      | BELLEVUE                | WA                  | 98004                         | US      |

**2. DEBTOR'S NAME:** Provide only one Debtor name (2a or 2b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name), if any part of the individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here ☐ and provide the individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

|                        |                         |                     |                               |         |
|------------------------|-------------------------|---------------------|-------------------------------|---------|
| 2a ORGANIZATION'S NAME |                         |                     |                               |         |
| OR                     | 2b INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX  |
| 2c MAILING ADDRESS     | CITY                    | STATE               | POSTAL CODE                   | COUNTRY |

**3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY):** Provide only one Secured Party name (3a or 3b)

|  |                         |                     |                               |         |
|--|-------------------------|---------------------|-------------------------------|---------|
| 3a ORGANIZATION'S NAME<br>CORPORATION SERVICE COMPANY, AS REPRESENTATIVE |                         |                     |                               |         |
| OR   | 3b INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX  |
| 3c MAILING ADDRESS   | CITY                    | STATE               | POSTAL CODE                   | COUNTRY |
| P.O. BOX 2576 UCCSPREP@CSCINFO.COM                                       | SPRINGFIELD             | IL                  | 62708                         | US      |

**4. COLLATERAL:** This financing statement covers the following collateral:  
**THIS IS AN ASSET SPECIFIC FILING - NOT AN ALL ASSET FILING.** All items of equipment, machinery, furniture, fixtures, software, inventory and/or other personal property now or hereafter subject to a term note, loan and security agreement, lease or other form of financing agreement between Secured Party and Debtor, including all parts, accessories, accessions and attachments thereto, and all replacements, substitutions and exchanges (including trade-ins) for such goods, together with proceeds of all of the foregoing, including proceeds in the form of goods, accounts, chattel paper, documents, instruments, general intangibles, investment property, deposit accounts, letter of credit rights and supporting obligations (the "Collateral").

**5. Check only if applicable and check only one box:** Collateral is ☐ held in a Trust (see UCC1Ad, item 17 and instructions) ☐ being administered by a Decedent's Personal Representative

**6a. Check only if applicable and check only one box:**

☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

**6b. Check only if applicable and check only one box:**

☐ Agricultural Lien ☐ Non-UCC Filing

**7. ALTERNATIVE DESIGNATION (if applicable):** ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licenser

**8. OPTIONAL FILER REFERENCE DATA:**

**UCC FINANCING STATEMENT AMENDMENT**

FOLLOW INSTRUCTIONS

|   |                                |
|---|--------------------------------|
| A. NAME & PHONE OF CONTACT AT FILER (optional)<br>CSC 1-800-858-5294    |                                |
| B. E-MAIL CONTACT AT FILER (optional)<br>SPRFiling@cscglobal.com        |                                |
| C. SEND ACKNOWLEDGMENT TO: (Name and Address)                           |                                |
| 2219 52337<br>CSC<br>801 Adlai Stevenson Drive<br>Springfield, IL 62703 | Filed In: Delaware<br>(S.O.S.) |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1a. INITIAL FINANCING STATEMENT FILE NUMBER  
2020 2258236 03/27/2020

1b. ☐ This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS  
Filer: attach Amendment Addendum (Form UCC3Ad) and provide Debtor's name in item 13

2. ☐ TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to the security interest(s) of Secured Party authorizing this Termination Statement

3. ☒ ASSIGNMENT (full or partial): Provide name of Assignee in item 7a or 7b, and address of Assignee in item 7c and name of Assignor in item 9  
For partial assignment, complete items 7 and 9 and also indicate affected collateral in item 8

4. ☐ CONTINUATION: Effectiveness of the Financing Statement identified above with respect to the security interest(s) of Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law

5. ☐ PARTY INFORMATION CHANGE:

Check one of these two boxes:

This Change affects ☐ Debtor or ☐ Secured Party of record

AND Check one of these three boxes to:

☐ CHANGE name and/or address: Complete item 6a or 6b, and item 7a or 7b and item 7c☐ ADD name: Complete item 7a or 7b, and item 7c☐ DELETE name: Give record name to be deleted in item 6a or 6b

6. CURRENT RECORD INFORMATION: Complete for Party Information Change - provide only one name (6a or 6b)

6a. ORGANIZATION'S NAME CORPORATION SERVICE COMPANY, as REPRESENTATIVE

|    |                          |                     |                               |        |
|----|--------------------------|---------------------|-------------------------------|--------|
| OR | 6b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
|    |                          |                     |                               |        |

7. CHANGED OR ADDED INFORMATION: Complete for Assignment or Party Information Change - provide only one name (7a or 7b) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name)

7a. ORGANIZATION'S NAME North Mill Credit Trust

|    |                          |                     |                               |        |
|----|--------------------------|---------------------|-------------------------------|--------|
| OR | 7b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
|    |                          |                     |                               |        |

|                     |                               |      |        |       |    |             |       |         |     |
|---------------------|-------------------------------|------|--------|-------|----|-------------|-------|---------|-----|
| 7c. MAILING ADDRESS | 9 Executive Circle, Suite 230 | CITY | Irvine | STATE | CA | POSTAL CODE | 92614 | COUNTRY | USA |
|---------------------|-------------------------------|------|--------|-------|----|-------------|-------|---------|-----|

8. ☒ COLLATERAL CHANGE: Also check one of these four boxes: ☐ ADD collateral ☐ DELETE collateral ☐ RESTATE covered collateral ☒ ASSIGN collateral

Indicate collateral:

Assigned Collateral is further described on attached Exhibit A to Equipment Schedule No. 03 to Master Equipment Lease Agreement dated as of June 3, 2021, attached hereto and made a part hereof.

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT: Provide only one name (9a or 9b) (name of Assignor, if this is an Assignment)  
If this is an Amendment authorized by a DEBTOR, check here ☐ and provide name of authorizing Debtor

9a. ORGANIZATION'S NAME CORPORATION SERVICE COMPANY, as REPRESENTATIVE

|    |                          |                     |                               |        |
|----|--------------------------|---------------------|-------------------------------|--------|
| OR | 9b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX |
|    |                          |                     |                               |        |

10. OPTIONAL FILER REFERENCE DATA: Debtor: Core Scientific, Inc. -

2219 52337

**EXHIBIT A****EQUIPMENT DESCRIPTION**

| <b>Supplier</b>                | <b>Equipment Description</b>  | <b>Equipment Location</b>            |
|--------------------------------|---|--------------------------------------|
| Sun Valley Electric Supply Co. | (10) Switchgear - Switchboard and Transformer<br>Square D Standard Swbd Series, 2-QED-2,<br>Serial Numbers:<br>L88015338/L87976956/L88015409<br>L88015430/L88020619/L88015429<br>L88015507/L88020718/L88015336<br>L88015339/L88020660/L88015512<br>L88015337/L88020673/L88015510<br>L88015335/L88020719/L88015508<br>L88015341/L88020672/L88015431<br>L88015509/L88020717/L88015340<br>L88015511/L88020618/L88015342<br>L88015428/L88020612/L88015408 | 155 Palmer Lane,<br>Marble, NC 28905 |

Including all additions, accessions, and attachments thereto, and all substitutions, replacements, and proceeds (including insurance proceeds) thereof.